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GP 2811

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)



TRANSMITTAL FORM		Application No.	09/672,375
		Filing Date	September 28, 2000
		First Named Inventor	Makarem A. Hussein
		Group Art Unit	2811
		Examiner Name	Douglas W. Owens
Total Number of Pages in This Submission	13	Attorney Docket Number	42P6126D

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	Return Postcard	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	JUN - 6 2002	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s)	TECHNOLOGY CENTER 2810	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	RECEIVED	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Angelo J. Gaz, Reg. No. 45,907 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	5/14/02

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Box Non-Fee Amendment, Assistant Commissioner for Patents, Washington, D.C. 20231 on:

Typed or printed name	Diane Martinez		
Signature		Date	5/14/02

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**COPY OF PAPERS
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PTO/SB/17 (11-01)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)
0.00

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Complete If Known	
Application Number	09/672,375
Filing Date	September 28, 2000
First Named Inventor	Makarem A. Hussein
Examiner Name	Douglas W. Owens
Group/Art Unit	2811
Attorney Docket No.	42P6126D

METHOD OF PAYMENT (check one)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number
02-2666

Deposit Account Name
Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of the application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee			
106	330	205	165	Design filing fee			
107	510	207	255	Plant filing fee			
108	740	208	370	Reissue filing fee			
114	160	214	80	Provisional filing fee			
SUBTOTAL (1)		(\$)					

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid	
3	1	20*	0	18.00 = \$0.00	
		3*	0	84.00 = \$0.00	
Multiple Dependent					

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20			
102	84	202	42	Independent claims in excess of 3			
104	280	204	140	Multiple Dependent claim, if not paid			
109	84	209	42	**Reissue independent claims over original patent			
110	18	210	9	**Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)		(\$)		0.00			

*or number previously paid, if greater. For Reissues, see below

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid		
105	130	205	65	Surcharge - late filing fee or oath			
127	50	227	25	Surcharge - late provisional filing fee or cover sheet			
139	130	139	130	Non-English specification			
147	2,520	147	2,520	For filing a request for ex parte reexamination			
112	920 *	112	920 *	Requesting publication of SIR prior to Examiner action			
113	1,840 *	113	1,840 *	Requesting publication of SIR after Examiner action			
115	110	215	55	Extension for reply within first month			
116	400	216	200	Extension for reply within second month			
117	920	217	460	Extension for reply within third month			
118	1,440	218	720	Extension for reply within fourth month			
128	1,960	228	980	Extension for reply within fifth month			
119	320	219	160	Notice of Appeal			
120	320	220	160	Filing a brief in support of an appeal			
121	280	221	140	Request for oral hearing			
138	1,510	138	1,510	Petition to institute a public use proceeding			
140	110	240	55	Petition to revive - unavoidable			
141	1,280	241	640	Petition to revive - unintentional			
142	1,280	242	640	Utility issue fee (or reissue)			
143	460	243	230	Design issue fee			
144	620	244	310	Plant issue fee			
122	130	122	130	Petitions to the Commissioner			
123	50	123	50	Processing fee under 37 CFR 1.17(q)			
126	180	126	180	Submission of Information Disclosure Stmt			
581	40	581	40	Recording each patent assignment per property (times number of properties)			
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))			
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))			
179	740	279	370	Request for Continued Examination (RCE)			
169	900	169	900	Request for expedited examination of a design application			
Other fee (specify)							

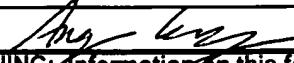
* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Angelo J. Gaz	Registration No. (Attorney/Agent)	45,907	Telephone	(714) 557-3800
Signature				Date	5/14/02

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